Community Programs Division of City Manager's Office 5. a) Is the Applicant Organization Delinquent on State or Federal Debt' (SELECT One): Juvernile Accountability Incentive Block Grants (Federal CFDA-16 523) Juvernile Justice and Prevention Projects OR Counseling and Support Services Juvernile Justice and Prevention Projects OR Counseling and Support Services Juvernile Justice and Prevention Projects OR Juvernile Justice and Prevention Projects OR Counseling and Support Services Juvernile Justice and Prevention Projects OR Juvernile Justice and Prevention Projects OR Counseling and Support Services Juvernile Justice and Prevention Projects OR College Station, Texas Justice Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Community Programs Coordinator Address: P. O. Box 9960 City/State/Zip: College Station Texas Title (Mr., Ms., Dr., Judge, etc.): Ms. Title (Mr., Ms., Dr., Judge, etc.): Mr. Title (Mr., Ms.			Grant	Applicat	tion Cov	er Sheet			
City of College Station City of College Station Community Programs Division of City Manager's Office 5. a) Is the Applicant Organization Delinquert on State or Federal Deht' (SELECT One): Juve relief SELECT One): Juve relief SELECT One): Juve relief Accountabity Incentive Block Grants (Federal CFDA-18-52) Juve REFER Cameriol (for MMSdypyr): Total Of SELECT the Projects Main Purpose Area from ONE of the FOUR Catalysis and Security Projects OR Countering and Story Bear own Trainfold Source a) Invocation Justice and Propose Area from ONE of the FOUR Catalysis and Countability Accountability of the Service Area: a) Prosection b) Lew Enforce c) Victim Services Projects OR Total Of Catalysis Accountability Countability Count	1. ENTER Lega	l Name of the Organ	nization Applying:		2. ENTER Title o	f the Project:	*		
S. a) Is the Applicant Organization Delinquent on: S. a) Is the Applicant Organization Delinquent on: S. a) Is the Applicant Organization Delinquent on: S. b) ENTER Grant Organization Delinquent on: S. b) ENTER Grant Organization Delinquent on: S. b) ENTER Grant Period (ex. EMMED) States (Federal CFDA 16.523) Juvenille Accountabrity Incentive a Black Grants (Federal CFDA 16.523) Juvenille Accountabrity Incentive a Black Grants (Federal CFDA 16.523) Juvenille Accountabrity Incentive a Black Grants (Federal CFDA 16.523) Juvenille Accountabrity Incentive a Black Grants (Federal CFDA 16.523) Juvenille Accountabrity Incentive a Black Grants (Federal CFDA 16.523) Juvenille Accountabrity Incentive a Black Grants (Federal CFDA 16.523) Juvenille Accountabrity Incentive All Incentifies Organization (viii) But-off the CDIP Incentifies Organization (viii) But-off the CDIP Incentifies Organization Orga						Decision Making t	or First Offenders	5	
5. a) is the Applicant Organization Delinquent on Slate or Federal Debt' (SELECT Cnop): Jan-02 Forderal Deb	3. ENTER Division or Unit to Administer the Project:				4. ENTER Agend	y's State Payee Ide	ntification Numbe	er:	
State or federal Debt' (SELECT One): Jack Profester Debt' (SELECT	Commi	unity Programs Divis	sion of City Mana	ger's Office		74-600	00-534		
JBO1120-15530-03 B. ENTER Grant Period (ex: MM/dd/yyyy): From: 8801/03 To: 07/31/04 10. SELECT the Project's Main Purpose Area shorn ONE of the FOUR classification budget from budget				No 🔻	5. b) ENTER Dat	e of the Last Audit:		Jan-02	
8. ENTER Grant Period (ex: MM/dd/yyyy): From: 080103 To: 073104 10. SELECT the Project's Main Purpose Area from ONE of the FOUR Calegorises Listed Below Based on Funding Source* . 10. Juvenile Justice and Prevention Projects OR Counseling and Support Services . 2) IV. Citim Services Projects OR 2) IV. Citim Services Projects OR 11. For VAWA Projects OWLY, ENTER the Appropriate Percentage for Each 2) Prosection . 12. a) LIST the Cities and Counties in the Service Area: . 2) IV. Citim Services Description . 3) ENTER the Contact Person Information: . 13. a) ENTER the Contact Person Information: . 11. For VAWA Projects OWLY, ENTER the Appropriate Percentage for Each 2) IV. Citim Services . 3) ENTER the Contact Person Information: . 13. a) ENTER the Contact Person Information: . 11. For VAWA Projects OWLY, ENTER the Appropriate Percentage for Each 2) IV. Citim Services . 4) Crime Stoppers Assistance Projects OR 4) Crime Stoppers Assistance Projects OR 4) Crime Stoppers Assistance Projects OR 5) SELECT Headquarters County; Person 6) Counties in the Service Area: . 5) SELECT Headquarters County; Person 6) Counties in the Service Area: . 6) ENTER Project Official Information: . 11. For VAWA Projects OWLY, ENTER the Appropriate Percentage for Each 2) IV. Citim Services . 6) ENTER the Population of HQ Cnty: . 13. b) ENTER the Application of HQ Cnty: . 140,000 15. BN ENTER the Population of HQ Cnty: . 16. For Counties Information: . 17. Address: . P. O. Box 9980 18. City State Zip: . 18. Description: . 19. Description: . 20. Description: .					7. If Continuation	Project, ENTER Cu	ment Grant Num	ber (15000- 01):	
Total O3010/3	Juv enile Accou	untability Incentive B	ock Grants (feder	al CFDA-16.523) 💂					
10. SELECT the Project's Main Purpose Area from ONE of the FOUR Categories Listed Below Based on Trunding Source: 3) Juvenila Justice and Prevention Projects OR Counseling and Support Services 3) Victim Services Projects ONE 11. For VANNA Projects ONLY, ENTER the Appropriate Percentage for Each. 3) Prosection 12. a) List the Cities and Counties in the Service Area: College Station, Texas College Station, Texas College Station, Texas College Station, Texas 13. a) ENTER the Contact Person Information: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calisham Position: Community Programs Coordinator Address: P. O. Box 9960 City/State/Zip: College Station Texas 77842 Telephone: 979764-3499 Fax: 9797764-3894 E-mail: Community Programs Coordinator Address: Position: Community Programs Coordinator Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calisham Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Po			7	07/21/04	1				
Categories Listed Below Based on Funding Source: a) Juvenila Usidice and Prevention Projects OR Counseling and Support Services b) Victim Services Projects OR 11. For VAWA Projects ONLY, ENTER the Appropriate Percentage for Each: a) Prosection b) Lew Enforc c) Victim Services Projects College Station, Texas c) ENTER Population of HQ Cnty: 12. a) LIST the Cities and Counties in the Service Area: College Station, Texas c) ENTER Population of HQ Cnty: 140.000 13. a) ENTER the Contact Person Information: Title (Mr. Ms., Dr., Judge, etc.): Ms. Name: Peggy College Station Texas 77842 Telephone: 979764-3499 Fax: 979764-3894 City/State/Zip: College Station Toxas 77842 Telephone: 579764-3499 Fax: 979764-3894 Title (Mr. Ms., Dr., Judge, etc.): Ms. Name: Position: Community Programs Coordinator Address: P. O. Box 9960 City/State/Zip: College Station Toxas 77842 Telephone: 979764-3499 Fax: 979764-3894 Title (Mr. Ms., Dr., Judge, etc.): Ms. Name: Position: Community Programs Coordinator Address: P. O. Box 9960 City/State/Zip: College Station Toxas 77842 Telephone: 979764-3499 Fax: 9797764-3894 Title (Mr. Ms., Dr., Judge, etc.): Ms. Name: Position: Community Programs Coordinator Address: P. O. Box 9960 City/State/Zip: College Station Toxas 77842 Telephone: 9797764-3499 Fax: 9797764-3894 Title (Mr. Ms., Dr., Judge, etc.): Ms. Name: 13. d) ENTER the Financial Officer Information: Title (Mr. Ms., Dr., Judge, etc.): Ms. Name: 13. d) ENTER the Financial Officer Information: Title (Mr. Ms., Dr., Judge, etc.): Ms. Name: 13. d) ENTER the Financial Officer Information: Title (Mr. Ms., Dr., Judge, etc.): Ms. Name: 13. d) ENTER the College Station to us 14. b) Enter the Option in Response to a Request for Application in Response to a Request for Application in Response to a Request for Application (ErA) as a project with Statewide Impact, ENTER the Date the Application Was Submitted Brazos Valley Council of Governments - 1300 14. b) Enter the Date and City of the Workshop Altended: Brazos Valley Council of Governments - 1300 15. b) C		1	1	<u> </u>					
Discriming and Support Services Discriming Services Projects Discriming Services	Categories Liste	ed Below Based on	"Funding Source"	:	\$7,020	\$780	N/A	\$7,800	
d) Crime Stoppers Assistance Projects 11. For VAWA Projects ONLY, ENTER the Appropriate Percentage for Each a) Prosection b) Law Enforc c) Victim Services d) Court 12. a) LIST the Cities and Counties in the Service Area: College Station, Texas College Station, Texas c) ENTER Population of HC Crty: 140.000 13. a) ENTER the Contact Person Information: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: Community Programs Coordinator Address: P O, Box 9960 City/State/Zip: College Station Texas 77842 Telephone: 979764-3499 Fax: 979764-3894 E-mail: 13. c) ENTER the Authorized Official Information: Title (Mr., Ms., Dr., Judge, etc.): Mr. Name: Gionn Brown Position: Address: P O, Box 9960 City/State/Zip: College Station Texas 77842 Telephone: Peggy Calliham Position: Community Programs Coordinator Address: P O, Box 9960 City/State/Zip: College Station Texas 77842 Telephone: Position: Community Programs Coordinator Address: P O, Box 9960 City/State/Zip: College Station Texas 77842 Telephone: Position: Community Programs Coordinator Address: P O, Box 9960 City/State/Zip: College Station Texas 77842 Telephone: Position: Community Programs Coordinator Address: P O, Box 9960 City/State/Zip: College Station Texas 77842 Telephone: Position: Fiscal Services Director Address: P O, Box 9960 City/State/Zip: College Station Texas 77842 Telephone: Position: Fiscal Services Director Address: P O, Box 9960 City/State/Zip: College Station Texas 77842 Telephone: Position: Fiscal Services Director Address: P O, Box 9960 City/State/Zip: College Station Texas 77842 Telephone: Position: Fiscal Services Director Address: P O, Box 9960 City/State/Zip: College Station Texas 77842 Telephone: Position: Fiscal Services Director Address: P O, Box 9960 City/State/Zip: College Station Texas Programs College Stat				R	c) Law Enforce	me n t Projects O	R		
11. For VAWA Projects ONLY, ENTER the Appropriate Percentage for Each: a) Prosection b) Lew Enforc College Station, Texas College Station, Texas 13. a) ENTER the Contact Person Information: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box 9860 City/State/Zip: College Station Texas 77842 E-mail: Docalilham@ci.college-station.bc.us 13. a) ENTER the Project Director Information: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: Assistant City Manager Address: P. O. Box 9860 City/State/Zip: College Station Texas 77842 Telephone: 979784-3499 Fax: 979764-3894 E-mail: Jocalilham@ci.college-station.bc.us 13. d) ENTER the Project Director Information: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: 979784-3510 Fax: 979764-3481 Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: 979784-3510 Fax: 979764-3481 Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: 979784-3510 Fax: 979764-3481 Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: 979784-3510 Fax: 979764-3481 Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: 979784-3510 Fax: 979764-3481 Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Charles Cryan Position: 979784-3510 Fax: 979764-3894 Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: 979784-3510 Fax: 979764-3894 Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: 979784-3510 Fax: 979764-3894 Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: 979784-3510 Fax: 979764-3894 Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: 979784-3510 Fax: 979764-3894 Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: 979784-3510 Fax: 979764-3894 Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliha	Counseling ar	nd Support Services							
a) Prosection b) Law Enforc: c) Victim Services d) Court	b) Victim Serv	rices Projects OF	?		d) Crime Stopp	ers Assistance Pr	rojects		
a) Prosection b) Law Enforc: c) Victim Services d) Court							· · · · · · · · · · · · · · · · · · ·	~	
Description: Desc	11. For VAWA	Projects <i>ONLY</i> , EN	7			ſ]		
College Station Texas College Station Texas c) ENTER the Authorized Official Information: Title (Mr., Ms., Dr., Judge, etc.): Mr. Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: position: Community Programs Coordinator Name: Peggy Calliham Position: Desaltham@cc.college-station tx us 13. c) ENTER the Project Director Information: Title (Mr., Ms., Dr., Judge, etc.): Mr. Name: Peggy Calliham Position: Desaltham@cc.college-station tx us 13. d) ENTER the Financial Officer Information: Title (Mr., Ms., Dr., Judge, etc.): Mr. Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: college-station tx us 13. d) Enter the Foliation of HQ Cnly: 140,000 Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: college-station tx us 14. a) Did the Application in Response to a Request for Application Workshop? (SELECT One): No position: Application in Response to a Request for A	a) Prosection	V. N. C	b) Law Enforc.		c) Victim Services		d) Court		
13. a) ENTER the Contact Person Information: 140,000	12. a) LIST the		N. 401 M. 1			b) SELECT Headq	uarters County:	Brazos 🕶	
13. a) ENTER the Contact Person Information: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979764-3499 Fax: 979/764-3894 E-mail:						1 .			
Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: pcalliham@ci college-station tx us 13. c) ENTER the Project Director Information: Title (Mr., Ms., Or., Judge, etc.): Ms. Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box. 9960 Title (Mr., Ms., Or., Judge, etc.): Ms. Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 Telephone: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 Telephone: 979/764-3664 Telephone:									
Position: Community Programs Coordinator Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: localliham@c: college-station bx us 13. c) ENTER the Project Director Information: Title (Mr., Ms., Or., Judge, etc.): Ms. Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box. 9960 Title (Mr., Ms., Or., Judge, etc.): Ms. Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 Telephone: Position: Fiscal Services Director Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 Telephone: 979/764-3664 Fax: 979/764-3899 E-mail: localliham@c: college-station bx us 14. a) Did the Application In Response to a Request for Application wyonkshop? (SELECT One): No Pistate of Governments - 1300 Title (Mr. Ms., Dr., Judge, etc.): Mr. Name: Charles Cryan Position: Fiscal Services Director Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3694 Fax: 979/764-3894 Telephone: 979/764-6364 Fax: 979/764-3899 E-mail: localliham@c: college-station bx us 14. b) ENTER the Date and City of the Workshop Attended: No Pistate of Governments - 1300 Title (Mr. Ms., Dr., Judge, etc.): Mr. Name: Charles Cryan Position: Fiscal Services Director Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3694 Fax: 979/764-3899 E-mail: localliham@c: college-station bx us 14. b) ENTER the Date and City of the Workshop Attended: No Pistate of Governments - 1300 Title (Mr. Ms., Dr., Judge, etc.): Mr. It b) ENTER the Date and City of the Workshop Attended: Distance of the Mr. Ms. Dr. Judge, etc.): Mr. It b) ENTER the Date and City of the Workshop Attended: Distance of the Mr. Ms. Dr. Judge, etc.): Mr. The Mistance of the Mr. Ms. Dr. Judge, etc.): Mr. Title (Mr. Ms., Dr., Judge, etc.): M	Title (Mr., Ms., I	Dr., Judge, etc.):	Ms.		Title (Mr., Ms., D	r., Judge, etc.):	Mr.		
Position: Community Programs Coordinator Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: position: peggy Calliham Position: Community Programs Coordinator Title (Mr., Ms., Or., Judge, etc.): Ms. Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box. 9960 Title (Mr., Ms., Or., Judge, etc.): Ms. Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3690 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3699 Fax: 979/764-3894 Telephone: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3664 Fax: 979/764-3899 E-mail: coalliham@ciccollege-station bx us 14. a) Did the Application in Response to a Request for Applications (RFA) as Published in the Texas Register? (SELECT One): No Title (Mr., Ms., Dr., Judge, etc.): Mr. Name: Charles Cryan Position: Fiscal Services Director Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3664 Fax: 979/764-3899 E-mail: coalliham@ciccollege-station bx us 14. a) Did the Application in Response to a Request for Applications (RFA) as Published in the Texas Register? (SELECT One): No Title (Mr., Ms., Dr., Judge, etc.): Mr. Name: Charles Cryan Cryan Position: Fiscal Services Director Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-364 Fax: 979/764-3899 E-mail: coalliham@ciccollege-station bx us 14. b) E-mail: coryan@ciccollege-station bx us 14. b) E-mail: bacal/Regional Project, SELECT the COG to Which the Application was Submitted: Brazos Valley Council of Governments - 1300 Title (Mr., Ms., Dr., Judge, etc.): Mr. In	Name:	Peggy	Calliham		Name:	Glenn	Brown		
Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: poalliham@c. college-station bt.us 13. c) ENTER the Project Director Information: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3510 Fax: 979/764-3481 E-mail: obrown@ci college-station bt.us 13. d) ENTER the Financial Officer Information: Title (Mr., Ms., Dr., Judge, etc.): Mr. Name: Charles Cryan Position: Fiscal Services Director Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: poalliham@ci college-station bt.us 14. a) Did the Applicant Attend an Application Workshop? (SELECT One): 15. a) Is this Application in Response to a Request for Applications (RFA) as Published in the Texas Register? (SELECT One): Olif this is a Project with Statewide Impact, ENTER the Date the Application Was Submitted: Brazos Valley Council of Governments - 1300 Total Comment System (TRACS): 16. FOR COG USE ONLY a) Is this Application Shared with Another COG? (ENTER "Yes" or "No"): D) CPTN #: D) CPTN #: D) CPTN #: D) COG Application ID:	Position:		ns Coordinator		Position:	Assistant City Manager			
City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail:					Address:				
Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: poalliham@ci_college_station bx us 13. c) ENTER the Project Director Information: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3894 E-mail: gbrown@ci_college_station_tx_us Title (Mr., Ms., Dr., Judge, etc.): Mr. Name: Charles Cryan Position: Fiscal Services Director Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: college-station Texas 77842 Telephone: 979/764-6364 Fax: 979/764-3899 E-mail: corvan@ci_college_station_tx_us 14. a) Did the Applicant Attend an Application Workshop? (SELECT One): 15. a) Is this Application in Response to a Request for Applications (RFA) as Published in the Texas Register? (SELECT One): No Tolephone: 979/764-3894 Diff a Local/Regional Project, SELECT the COG to Which the Application Was Submitted: Diff this is a Project with Statewide Impact, ENTER the Date the Application Was Submitted to the Texas Review and Comment System (TRACS): 16. FOR COG USE ONLY a) Is this Application Shared with Another COG? (ENTER "Yes" or "No"): b) CPTN #: c) Priority #: d) COG Application ID:			Texas	77842			Texas	77842	
E-mail:	Telephone:		1.00		****				
13. c) ENTER the Project Director Information: Title (Mr., Ms., Dr., Judge, etc.): Ms. Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: pcallinam@ci college-station tx.us 14. a) Did the Applicant Attend an Application in Response to a Request for Applications (RFA) as Published in the Texas Register? (SELECT One): No This is a Project with Statewide Impact, ENTER the Date the Application Was Submitted: Brazos Valley Council of Governments - 1300 Title (Mr., Ms., Dr., Judge, etc.): Mr. Name: Charles Cryan Position: Fiscal Services Director Address: P. O. Box 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-6364 Fax: 979/764-3899 E-mail: ccryan@ci.college-station.tx.us 14. b) ENTER the Date and City of the Workshop Attended: Application Was Submitted: Brazos Valley Council of Governments - 1300 Title (Mr., Ms., Dr., Judge, etc.): Mr. Name: Charles Cryan Position: Fiscal Services Director Address: P. O. Box 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-6364 Fax: 979/764-3899 E-mail: ccryan@ci.college-station.tx.us 14. b) ENTER the Date and City of the Workshop Attended: Application Was Submitted: Brazos Valley Council of Governments - 1300 Title (Mr., Ms., Dr., Judge, etc.): Mr. Name: Charles Cryan Fiscal Services Director Address: P. O. Box 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-6364 Fax: 979/764-3899 E-mail: ccryan@ci.college-station.tx.us 14. b) ENTER the Date and City of the Workshop Attended: Application Was Submitted: Brazos Valley Council of Governments - 1300 Total College Station of Texas 77842 Telephone: 979/764-3899 E-mail: bcallege-station tx.us 14. b) ENTER the Financial Office Information: 15. a) Is this Application in Response to a Request for Application Was Submitted: Brazos Valley Council of Governments - 1300 Total College Station of Texas 77842 T		ncalliham@ci colle	ne-station by us		E-mail:	ahrawa@ci college	etation ty us		
Name: Peggy Calliham Position: Community Programs Coordinator Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: pcalliham@ci college-station tx.us 14. a) Did the Applicant Attend an Application Workshop? (SELECT One): 15. a) Is this Application in Response to a Request for Applications (RFA) as Published in the Texas Register? (SELECT One): No If this is a Project with Statewide Impact, ENTER the Date the Application Was Submitted to the Texas Review and Comment System (TRACS): a) Is this Application Shared with Another COG? (ENTER "Yes" or "No"): b) CPTN #: c) Priority #: d) COG Application ID:					47000				
Position: Community Programs Coordinator Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: coallinam@ci college-station tx.us 14. a) Did the Application Workshop? (SELECT One): 15. a) Is this Application in Response to a Request for Applications (RFA) as Published in the Texas Register? (SELECT One): No If this is a Project with Statewide Impact, ENTER the Date the Application Was Submitted to the Texas Review and Comment System (TRACS): a) Is this Application Shared with Another COG? (ENTER "Yes" or "No"): b) CPTN #: c) Priority #: d) COG Application ID:	Title (Mr., Ms.,	Dr., Judge, etc.):	Ms.		Title (Mr., Ms., D	Or., Judge, etc.):	Mr.		
Address: P. O. Box. 9960 City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: pcallinam@ci.college-station.tx.us 14. a) Did the Application Workshop? (SELECT One): 15. a) Is this Application in Response to a Request for Applications (RFA) as Published in the Texas Register? (SELECT One): No	Name:	Peggy	Calliham		Name:	Charles	Cryan		
City/State/Zip: College Station Texas 77842 Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: pcallinham@ci.college-station.tx.us 14. a) Did the Applicant Attend an Application Workshop? (SELECT One): 15. a) Is this Application in Response to a Request for Applications (RFA) as Published in the Texas Register? (SELECT One): No	Position:	Community Progra	ms Coordinator		Position:	Fiscal Services Dire	ector		
Telephone: 979/764-3499 Fax: 979/764-3894 E-mail: pcallinam@ci college-station.tx.us 14. a) Did the Applicant Attend an Application Workshop? [SELECT One): 15. a) Is this Application in Response to a Request for Applications (RFA) as Published in the Texas Register? (SELECT One): 16. if this is a Project with Statewide Impact, ENTER the Date the Application Was Submitted to the Texas Review and Comment System (TRACS): 17. a) Is this Application in Response to a Request for Applications (RFA) as Published in the Texas Register? (SELECT One): 18. FOR COG USE ONLY 19. p79/764-3899 19. p79/764-6364 Fax: 979/764-3899 10. project. college-station.tx.us 14. b) ENTER the Date and City of the Workshop Attended: 16. b) If a Local/Regional Project, SELECT the COG to Which the Application Was Submitted: 17. Brazos Valley Council of Governments - 1300 18. FOR COG USE ONLY 19. a) Is this Application Shared with Another COG? (ENTER "Yes" or "No"): 19. City 19. City 10. COG Application ID:	Address:	P. O. Box . 9960			Address:	P. 0 . Box 9960			
E-mail:	City/State/Zip:	College Station	Texas	77842	City/State/Zip:	College Station	Texas	77842	
14. a) Did the Applicant Attend an Application Workshop? (SELECT One): 15. a) Is this Application in Response to a Request for Applications (RFA) as Published in the Texas Register? (SELECT One): No If this is a Project with Statewide Impact, ENTER the Date the Application Was Submitted to the Texas Review and Comment System (TRACS): 16. FOR COG USE ONLY a) Is this Application Shared with Another COG? (ENTER "Yes" or "No"): b) CPTN #: c) Priority #: d) COG Application ID:	Telephone:	979/764-3499	Fax:	979/764-3894	Telephone:	979/7646364	Fax:	979/764- 38 99	
Application Workshop? (SELECT One): 15. a) Is this Application in Response to a Request for Applications (RFA) as Published in the Texas Register? (SELECT One): No Priority #: No No Dif a Local/Regional Project, SELECT the COG to Which the Application Was Submitted: Application Was Submitted: Brazos Valley Council of Governments - 1300 Brazos Valley Council of Governments - 1300 Cog Application Was Submitted to the Texas Review and Comment System (TRACS): City City Cog Application ID: City City	E-mail:	pcalliham@ci.colle	ge-station.tx.us						
15. a) Is this Application in Response to a Request for Applications (RFA) as Published in the Texas Register? (SELECT One): No Priority #: b) If a Local/Regional Project, SELECT the COG to Which the Application Was Submitted: Brazos Valley Council of Governments - 1300 Priority #: b) If a Local/Regional Project, SELECT the COG to Which the Application Was Submitted: Brazos Valley Council of Governments - 1300 Priority #: b) CPTN #: c) Priority #: d) COG Application ID:	Application Workshop? (SELECT								
Register? (SELECT One): No Brazos Valley Council of Governments - 1300 c) If this is a Project with Statewide Impact, ENTER the Date the Application Was Submitted to the Texas Review and Comment System (TRACS): 16. FOR COG USE ONLY a) Is this Application Shared with Another COG? (ENTER "Yes" or "No"): b) CPTN #: c) Priority #: d) COG Application ID:	15. a) Is this Ap				b) If a Local/Reg	ional Project, SELE	CT the COG to V	Vhich the	
c) If this is a Project with Statewide Impact, ENTER the Date the Application Was Submitted to the Texas Review and Comment System (TRACS): 16. FOR COG USE ONLY a) Is this Application Shared with Another COG? (ENTER "Yes" or "No"): b) CPTN #: c) Priority #: d) COG Application ID:	0.000.000.000								
and Comment System (TRACS): 16. FOR COG USE ONLY a) Is this Application Shared with Another COG? (ENTER "Yes" or "No"): b) CPTN #: c) Priority #: d) COG Application ID:	register: (OEL			NO ¥	Brazos Valley	Council of Govern	ments - 1300		
16. FOR COG USE ONLY a) Is this Application Shared with Another COG? (ENTER "Yes" or "No"): b) CPTN #: c) Priority #: d) COG Application ID:		•	Impact, ENTER	the Date the Applica	tion Was Submitted	to the Texas Review	ı		
City			a) Is this Applic	ation Shared with An	other COG? (ENTER	R "Yes" or "No"):	· .		
City	h) CPTN #-		c) Priority #	:	۸.	COG Annlication ID			
			<u> ۱ ۵/۰۰۵٬۰۰۰</u>		3)	- Ser approaction to			

G	rant B	udget			
Legal Name of Organization:	City of College	e Station			
Title of Project:	Decision Maki	ing for First Offe	enders		
Grant Period:	From:	8/1/2003	To:	7/31/2004	
Grant Number:	JB01J20-1553	30-03		<u> </u>	
	BUDGET D	ETAIL			
Minimum Cash Match Percentage:	10%	E)	NTER CJD Req	uested Amount:	\$7,020
ENTER Program Income (If Applicable):	\$0	Waived	Funds (JAIBG	projects ONLY:)	
Minimum Cash Match:	\$780			I Project Costs:	\$7,800
PERSONNEL	% of Base Salary	CJD Funds	Match		Total
CONTRACTUAL AND PROFESSIONAL SERVICES		CJD Funds	Match	-	\$0 Total
Fees for trainers at a cost of \$70 per participant at a maximum of 100 participants		\$6,300	\$700		\$7,000
TRAVEL AND TRAINING		CJD Funds	Match		Total
EQUIPMENT		CJD Funds	Match		\$0 Total
SUPPLIES AND DIRECT OPERATING EXPENSES		CJD Funds	Match		\$0 Total
Food supplies for students who are not allowed to leave the program during the 8 hour class are provided as a working lunch session at \$8 per participant with a maximum of 100 participants.		\$ 720	\$80		\$800
INDIRECT COSTS (the Direct Costs Against Which the Indirect Rate is Charged)		CJD Direct Costs	Match Direct Costs	Indirect Rate	Total
	BUDGET SUM	MARY			\$0
BUDGET CATEGORIES	1	CJD	MATCH	TOTAL	
PERSONNEL	. 53	\$0	\$0	\$0	
CONTRACTUAL AND PROFESSIONAL SERVICES		\$6,300	\$700	\$7,000	1
TRAVEL AND TRAINING		\$0	\$0	\$0	l
EQUIPMENT		\$0	\$0	\$0	
SUPPLIES AND DIRECT OPERATING EXPENSES		\$720	\$80	\$800	
TOTAL DIRECT COSTS:	1	\$7,020	\$780	\$7,800	1
INDIRECT COSTS		\$0	\$0	\$0	
TOTAL:		\$7,020	\$780	\$7,800	
		Total Match:	\$7		
Actua	al Cash Match	1		0%	

JAIBG PROJECT NARRATIVE & SUMMARY

PART 1: PROBLEM STATEMENT AND DATA

Need Help?

Many teen offenders don't have a realistic vision of their future and how today's choices will affect their lives in the future. They need training and tools for goal-setting and decision-making that will yield positive results, self-esteem, and success.

PART 2: GOAL STATEMENT

Need Help?

Train first-time juvenile offenders to identify values, set goals, and evaluate negative vs. positive choices and the end result of each choice in order to improve their chances of not repeating their mistakes.

PART 3: TARGET GROUP

Need Help?

Geographic Area: College Station, Brazos County Texas

Target Audience: A maximum of 100 first or second time class C misdemeanor offenders

receiving citations in College Station Municipal Court

Gender: Male and Female Race/Ethnicity: All eligible

Age: 12-18 year olds still in secondary school

PART 4: PROJECT ACTIVITIES

Need Help?

4.1 Eligible Activities (Purpose Areas) Enter the percentages and amount per activity for this project:

Purpose Area 1	%	\$
(Facilities)	1	
Purpose Area 2	45%	\$3510
(Sanctions)		İ
Purpose Area 3 (Justice	%	\$
System)		
Purpose Area 4	%	\$
(Prosecutors)	1	
Purpose Area 5 (Youth	%	\$
Violence)5		
Purpose Area 6	: %	\$
(Equipment/Training)	·	

Purpose Area 7 (Accountability)	55%	\$4290
	%	\$
Purpose Area 8 (Court Based)		
Purpose Area 9 (Drug Court	%	\$
Program)		
Purpose Area 10 (Interagency	%	\$
Information)		
Purpose Area 11 (Accountability	%	\$
Based Program)		
Purpose Area 12 (Substance	%	\$
Testing)		

4.2 Describe the manner in which you will perform the selected activities (purpose areas), and any other information that allows a reader to understand the specifics of the project's regular activities:

Eligible teens will be referred to an 8-hour program as a routine part of their sentencing for first or second time criminal offenses as deemed appropriate by the Municipal Court Judge or the Teen Court Coordinator. Classes will be scheduled from 8-5 pm on Saturdays as needed to accommodate the case load. Classes will be limited to 20 students per session.

4.3 Provide a list of work products of staff, if any (i.e. program brochures, training manuals, protocols, etc.)

This program utilizes "Eight Keys to Change" as a philosophical approach to helping teens identify and understand that they are in control of their choices and those choices will make the difference in their ultimate success or failure in life. Participants will discuss and be allowed to experiment and apply sound principles of change in a supportive environment. The program allows them to "buy in" to a process that can be used for the rest of their lives. They will complete a booklet of personally identified goals, values, personality styles, etc, that they may take with them as a means of remembering how to make better choices. Booklets have been created and are provided by the trainers.

PART 5: PROJECT OBJECTIVES

Need Help?

Provide specific output and outcome measures for this project:

Output Measures - Required for All Projects	Current Data	Target Level
Participants will be referred and complete 8 hours class	49 from Dec.01 through Dec. 02	Between 60- 100 participants
		İ

Outcome Measures - Required for All Projects	Current Data	Target Level
Participants will show not repeat offenses during the 12 months following completion	1 repeat offender out of 49 completions or 98% success rate	75% of those completeing class will not repeat w/in one year

PART 6: PROJECT SUMMARY: Need Help? Many teen offenders don't have a realistic vision of their future and how today's choices will affect their lives in the future. They need training and tools for goal-setting and decision-making that will yield positive results. self-esteem, and success. This program will train first-time juvenile offenders to identify values, set goals, and evaluate negative vs. positive choices and the end result of each path. It is expected to serve first or second time teenage offenders, between the ages of 12 and 18, who have been referred to the College Station Municipal Court for class C criminal misdemeanor offenses. It will serve a maximum of 100 teens annually as a required part of their community service through College Station Municipal Court and College Station Teen Court.

COMPREHENSIVE CERTIFICATION AND ASSURANCES – FEDERAL

OFFICE OF THE GOVERNOR CRIMINAL JUSTICE DIVISION P.O. Box 12428

> Austin, Texas 78711 512/463-1919 Fax: 512/475-2042

www.governor.state.tx.us

FUNDS

This document is a material representation of fact upon which reliance was placed with the agency determined to award the grant. If it is later determined that the grantee knowingly rendered an erroneous certification, the agency, in addition to any other remedies available to the federal government, may take available action.

ASSURANCES

The applicant hereby assures and certifies compliance with any and all applicable federal and state statutes, regulations, policies, guidelines and requirements, including, but not limited to, OMB Circulars No. A-21, A-110, A-122, A-87, A-133; Office of Justice Programs (OJP) Financial Regulations; Education Department General Administrative Regulations (EDGAR); E.O. 12372 Uniform Administrative Requirements for Grants and Cooperative Agreements — 28 CFR, Part 66, Common Rule; the Uniform Grant Management Standards (UGMS); and Title 1, Part 1, Chapter 3 of the Texas Administrative Code, that govern the application, acceptance and use of Federal and State funds for this project. In instances where multiple requirements apply to a grantee, the more restrictive requirement applies.

- 1. <u>LEGAL AUTHORITY</u> It possesses legal authority to apply for the grant. A resolution, motion or similar action has been duly adopted or passed as an official act of the applicant's governing body, authorizing the filing of the application, including all understandings and assurances contained therein, and directing and authorizing the person identified as the official representative, or their designee of the organization to act in connection with the application and to provide such additional information as may be required. State agencies are not required to adopt a resolution.
- DISPLACED PERSONS It will comply with requirements of the provisions of the Uniform Relocation Assistance and Real Property Acquisitions (42 USC §§ 4601 - 4655) which provide for fair and equitable treatment of persons displaced as a result of Federal and Federally assisted programs.
- POLITICAL ACTIVITY It will comply with provisions of Federal law which limit certain political activities of employees of State
 or local unit of government whose principal employment is in connection with an activity financed in whole or in part by Federal
 grants. (5 USC § 1501, et seq.)
- LABOR FAIR STANDARDS ACT It will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act (29 USC §§ 201 - 219) if applicable.
- 5. CONFLICT OF INTEREST It will establish safeguards to prohibit employees from using their positions for a purpose that is, or gives the appearance of being motivated by a desire for private gain for themselves or others, particularly those with whom they have family, business, or other ties.
- EXAMINATION OF RECORDS It will give the sponsoring agency, the Office of the Governor, or the Comptroller General, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the grant.
- COMPLIANCE WITH REQUIREMENTS It will comply with all requirements imposed by the Federal sponsoring agency, the
 Office of the Governor, or the Comptroller General, concerning special requirements of law, program requirements, and other
 administrative requirements.
- 8. **EPA VIOLATING FACILITIES** It will insure that the facilities under its ownership, lease or supervision, which shall be utilized in the accomplishment of the project, are not listed in the Environmental Protection Agency's (EPAs) list of Violating Facilities, and that it will notify the Federal grantor agency of the receipt of any communication from the Director of the EPA Office of Federal Activities indicating that a facility to be used in the project is under consideration for listing by the EPA.
- 9. FLOOD INSURANCE It will comply with the flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act (50 USC § 4001), which states that, on or after March 2, 1975, communities must purchase flood insurance, where such insurance is available in those communities. This requirement is a condition for the receipt of any Federal financial assistance for construction or acquisition purposes for use in any area that had been identified by the Secretary of the Department of Housing and Urban Development as an area having special flood hazards. The phrase "Federal financial assistance" includes any form of loan, grant, guaranty, insurance payment, rebate, subsidy, disaster assistance loan or grant, or any other form of direct or indirect Federal assistance.
- 10. HISTORIC PRESERVATION It will assist the federal grantor agency in its compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 USC § 470), Executive Order 11593, and the Archeological and Historical Preservation Act of 1974, as amended, (16 USC § 469a-1, et seq.) by (a) consulting with the State Historic Preservation Officer (SHPO) on the conduct of investigations, as necessary, to identify properties listed in or eligible for inclusion in the National Register of Historic Places that are subject to adverse effects (see 36 CFR Part 800.8) by the activity, and notifying the Federal grantor agency of the existence of any such properties, and by (b) complying with all requirements established by the Federal grantor agency to avoid or mitigate adverse effects upon such properties.
- grantor agency to avoid or mitigate adverse effects upon such properties.

 11. COMPLIANCE WITH LAWS AND GUIDES It will comply, and assure the compliance of all its subgrantees and contractors, with the applicable provisions of Title I of the Omnibus Crime Control and Safe Streets Act of 1968, as amended, the Juvenile Justice and Delinquency Prevention Act, or the Victims of Crime Act, as appropriate; the provisions of the current edition of the

- Office of Justice Programs Financial and Administrative Guide for Grants, M7100.1; and all other applicable Federal laws, orders, circulars, or regulations.
- 12. COMPLIANCE WITH CODE OF FEDERAL REGULATIONS It will comply with the provisions of 28 CFR applicable to grants and cooperative agreements including Part 18, Administrative Review Procedure; Part 20, Criminal Justice Information Systems; Part 22, Confidentiality of Identifiable Research and Statistical Information; Part 23, Criminal Intelligence Systems Operating Policies; Part 30, Intergovernmental Review of Department of Justice Programs and Activities; Part 42, Nondiscrimination/ Equal Employment Opportunity Policies and Procedures; Part 61, Procedures for Implementing the National Environmental Policy Act; Part 63, Floodplain Management and Wetland Protection Procedures; and Federal laws or regulations applicable to Federal Assistance Programs.

13. NONDISCRIMINATION -

- A. It will comply with all State and Federal statutes relating to nondiscrimination.
- B. It will comply, and all its contractors will comply, with the nondiscrimination requirements of the Omnibus Crime Control and Safe Streets Act of 1968, as amended, (42 USC § 3789(d)), or Victims of Crime Act (as appropriate); Title VI of the Civil Rights Act of 1964, as amended; Section 504 of the Rehabilitation Act of 1973, as amended; Subtitle A, Title II of the Americans With Disabilities Act (ADA) (1990); Title IX of the Education Amendments of 1972; the Age Discrimination Act of 1975; Department of Justice Non-Discrimination Regulations, 28 CFR Part 42, Subparts C, D, E, and G; and Department of Justice regulations on disability discrimination, 28 CFR Part 35 and Part 39.
- C. In the event a federal or state court or federal or state administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, sex, or disability against a recipient of funds, the recipient will forward a copy of the finding to the Office of Justice Programs, Office for Civil Rights.
- D. It will provide an Equal Employment Opportunity Program (EEOP) if required to maintain one, where the application is for \$500,000 or more
- 14. COASTAL BARRIERS It will comply with the provisions of the Coastal Barrier Resources Act (16 USC § 3501, et seq.) which prohibits the expenditure of most new Federal funds within the units of the Coastal Barrier Resources System.
- 15. SUPPLANTING PROHIBITION It will use funds to supplement existing funds for program activities and may not replace (supplant) non-Federal funds that have been appropriated for the same purpose. The applicant understands that potential supplanting will be the subject of monitoring and audit. Violations can result in a range of penalties, including suspension of future funds under this Program, suspension or debarment from Federal grants, recoupment of monies provided under this grant, and civil and/or criminal penalties.
- 16. <u>TAXES</u> It will comply will all State and Federal laws and are solely responsible for filing all required State and Federal tax forms.
- 17. <u>GRANT ADMINISTRATION</u> It will maintain an appropriate grant administration system to ensure that all terms, conditions and specifications of the grant, including these standard assurances, are met.
- 18. <u>PUBLIC INFORMATION</u> It will ensure that all information collected, assembled or maintained by the applicant relative to a project will be available to the public during normal business hours in compliance with Texas Government Code, Chapter 552, unless otherwise expressly prohibited by law.
- unless otherwise expressly prohibited by law.

 19. CHILD SUPPORT PAYMENTS It will comply with Section 231.006, Texas Family Code, which prohibits payments to a person who is in arrears on child support payments.
- 20. SUSPECTED CHILD ABUSE It will comply with Section 261.101 of the Texas Family Code, which requires reporting of all suspected cases of child abuse to local law enforcement authorities and to the Texas Department of Child Protective and Regulatory Services. Grantees shall also ensure that all program personnel are properly trained and aware of this requirement.
- 21. <u>RELATIVES</u> It will comply with Texas Government Code, Chapter 573, by ensuring that no officer, employee, or member of the applicant's governing body or of the applicant's contractor shall vote or confirm the employment of any person related within the second degree of affinity or the third degree of consanguinity to any member of the governing body, or to any other officer or employee authorized to employ or supervise such person. This prohibition shall not prohibit the employment of a person who shall have been continuously employed for a period of two years, or such other period stipulated by local law, prior to the election or appointment of the officer, employee, or governing body member related to such person in the prohibited degree.
- 22. <u>OPEN MEETINGS</u> If the applicant is a governmental entity, it will comply with Texas Government Code, Chapter 551, which requires all regular, special or called meeting of governmental bodies to be open to the public, except as otherwise provided by law or specifically excluded in the Texas Constitution.
- 23. HEALTH, HUMAN SERVICES, PUBLIC SAFETY OR LAW ENFORCEMENT AGENCY If the applicant is a health and human services agency or public safety or law enforcement agency, it will not contract with or issue a license, certificate or permit to the owner, operator or administrator of a facility if the license, permit or certificate has been revoked by another health and human services agency or public safety or law enforcement agency.
- 24. <u>LAW ENFORCEMENT AGENCY</u> If the applicant is a law enforcement agency regulated by Texas Government Code, Chapter 415, it will comply with all rules adopted by the Texas Commission on Law Enforcement Officer Standards and Education pursuant to Texas Government Code, Chapter 415, or it must provide the Criminal Justice Division with a certification from the Texas Commission on Law Enforcement Officer Standards and Education stating that the agency is in the process of achieving compliance with such rules.

CERTIFICATIONS

- The applicant certifies that it will provide a drug-free workplace by:
 - a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition.
 - Establish a drug-free awareness program to inform employees about:
 - i. the dangers of drug abuse in the workplace;
 - ii. the applicant's policy of maintaining a drug-free workplace;
 - iii. any available drug counseling, rehabilitation, and employee assistance programs; and
 - iv. the penalties that may be imposed upon employees for drug abuse violations.
 - c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a).
 - d. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:
 - i. abide by the terms of the statement, and
 - ii. notify the employer of any criminal drug statute conviction for a violation occurring in the workplace not later than five days after such conviction.
 - e. Notifying the agency within ten days after receiving notice under subparagraph (d)(ii) from an employee or otherwise receiving actual notice of such conviction.
 - f. Taking one of the following actions with respect to any employee who is so convicted:
 - Taking appropriate personnel action against such an employee, up to and including termination; or
 - ii. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a federal, state, or local health, law enforcement, or other appropriate agency.
 - g. Making a good faith effort to continue to maintain a drug-free workplace through the implementation of paragraphs (a), (b), (c), (d), (e), and (f).

If application is in excess of \$100,000, I certify to the best of my knowledge and belief to the following:

1.	No federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer
	or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of
	Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal
	loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of
	any federal contract, grant, loan, or cooperative agreement.
	Check here if any non-federal funds have been paid or will be paid to any person for influencing or attempting to

influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan, or cooperative agreement. You must also notify the Criminal Justice Division (CJD) or your local council of governments for the "Disclosure Form to Report Lobbying".

2. The undersigned shall require that the language of this certification be included in the award documents for all sub-awards at all tiers and that all sub-recipients shall certify accordingly.

AUDIT CERTIFICATION (SELECT THE APPROPRIATE CHOICE)

I certify:

The applicant agency currently expends combined federal funding of \$300,000 or more and, therefore, is required to submit an annual single audit by an independent auditor made in accordance with the Single Audit Act Amendments of 1996 and OMB Circular A-133.

The applicant agency currently expends combined federal funding of less than \$300,000 and, therefore, is exempt from the Single Audit Act and cannot charge audit costs to a CJD grant. I understand, however, that CJD may require a limited scope audit as defined in OMB Circular A-133.

EQUAL EMPLOYMENT OPPORTUNITY PLAN (EEOP) CERTIFICATION (SELECT THE APPROPRIATE CHOICE)

Definitions:

Type I Entity

Educational/medical/non-profit institution/Native American Tribe – certification required (select appropriate choice below); EEOP NOT required.

Type II Entity

All other recipients receiving more than \$25,000, but not more the \$500,000 – certification required (select the appropriate choice below); organizations must maintain EEOP on file for possible audit if the organization has more the 50 employees.

Type III Entity

For profit entities and state and local governments receiving \$500,000 or more – certification required (select the appropriate choice below); the organization must submit an EEOP to the Office for Civil Rights (OCR) for approval.

If your organiz	zation is a Type I, II or III En	tity, select one of the following:			
	any program or activity (28 CFR §	I Entity. This entity will comply with the prohibitions a 42.203), is not required to maintain an Equal Employment opportunity program guidelines of the Department	ment Opportunity Plan,		
		II Entity that employs less than 50 people. This entity in any program or activity (28 CFR § 42.302), but is nearly (28 CFR § 42.301) et seq).			
	prohibitions against discrimination i	Il Entity that employs 50 or more people. This entity in any program or activity (28 CFR § 42.302), an has CFR § 42.30 et seq), that is on file in the office of the	formulate an Equal		
	in any program or activity (28 CFR	III Entity. This entity will comply with the prohibitions § 42.302), and has formulated an Equal Employmen submitted to the Office for Civil Rights, Office of Justic I upon award of a grant.	t Opportunity Plan (28		
	RTIFICATION (SELECT THE APP cation is in excess of \$25,000,				
	By submission of this proposal, that neither the applicant agency nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency; or,				
	I am unable to certify the above sta	atement and have attached an explanation to the app	lication.		
Applicants must complete, sign and submit this form it to CJD before they will receive state and/or federal funds. Recipients of state and/or federal funds must fully understand and comply with the requirements listed for Federal and State Assurances on pages 1 and 2 of this document. Failure to comply may result in the withholding of funds, termination of the award, or other sanctions.					
	lege Station	Decision Making for First Offenders			
Applicant's Org	ganization	Project Title			
Glenn Broy	wn, Asst. City Manager		12/ 19 / 02		
Printed Name and Title of Authorized Official		Signature of the Authorized Official	Date		

OFFICE OF THE GOVERNOR **CRIMINAL JUSTICE DIVISION JCEC RESOLUTION**

P.O. Box 12428

Austin, Texas 78711 512/463-1919 Fax: 512/475-2042

Need Help?

We, the members of the Juvenile Crime Enforcement Coalition, certify by our signatures that we have reviewed and approved the

www.governor.state.tx.u

Coordinate	d Enforcement Plan as sub	omittea by:	City of College Station		
	List Grantee Agency				
	ppropriate box:		•		
this expe					
OR					
crime minir local	e control would be better serv nums. Please provide justific	ved by expen cation concer d purpose are	e certifies that the interest of the public sat ding funds in a proportion other than the 4 ning the availability of existing structures o eas. State the reasons for the alternative is below:	15% and 35% or initiatives to meet	
DI	المنافعة المستعدد الم		Carl Harris		
Law Enforce	ber by all that apply of indivi-	duais represe			
	ement	 	Juvenile Courts	2	
Police		1	Schools	1	
Sheriff			Business		
Prosecutor		_ 1	Social Service	1	
Probation (Jilicei	1	Prevention Organization		
Juvenile Cri	ne. ege Station, Brazos County		he Coordinated enforcement Pl an for Red		
	C board member name and p		Judge Ed Spillane, Co llege Stat Judge	ti onM unicipal Court	
, 588)	Name/Agency		Name/Agency		
Mark Langwell, College Station Police Dept.		Ross Fichthorn, City P			
	Name/Agency	<u></u>	Name/Agency		
R	on Fox, College Station I. S. I	D .	Tamara Jackson, Brazos County Juvenile Probation		
Name/Agency		Name/Agenc			
Lance	Jackson, College Station Pa Recreation	irks &	Name/Agent	y	
	Name/Agency		Name/Agenc	У	
	Name/Agency		Name/Agenc	у	
	Name/Agency		Name/Agenc	у	
l,	Ed Spillane		_ JCEC Chairman, attest that the mem	bers of the JCEC	

Signature of JCEC Chairman approve the JCEC grant application project.

Date Signed: 12/17/2002

Issue Date: September 2002